



King County

VETERANS AND HUMAN SERVICES LEVY 2008 STRATEGY AREA ANNUAL REPORTS

Strategy 2.1(a-1)

Development of Triaged List of Homeless High Utilizers of Sobering, Court, Jails, and the Health Database

OBJECTIVE

The Levy's investment in Strategy 2 focuses on ending long-term homelessness through a variety of interventions including identification, outreach, prevention, housing, supportive services and education. This particular sub-activity, 2.1(a-1), was designed to partner in initiatives to identify, engage, and house long-term homeless people who make the highest use of public safety and emergency medical systems.

As the Service Improvement Plan (page 19) notes, this investment will "create a triaged list of the homeless high utilizers of sobering, courts, jails, and the health system and coordinate their entry into an array of existing and new set-aside housing units, housing vouchers or other placements. Existing outreach and engagement programs will be reorganized in a new coordination model linked to housing placements to help reduce the number of homeless people cycling through expensive medical and criminal justice systems and living on the streets and in the shelters of downtown Seattle. The model could be based on the most successful elements of programs like Philadelphia's Outreach Coordination Center and San Diego's Serial Inebriate Program and Homeless Outreach Team."

POPULATION FOCUS

This activity will address the unmet needs of adults who are chronically homeless or at risk of homelessness, who experience mental illness and/or substance abuse, and who are frequent users of emergency services, hospitals, jails, shelters, sobering and/or detox centers. A proportion of these individuals will also be veterans of the United States military.

PROGRAM DESCRIPTION

The integrated database focuses on development of a centralized repository of information. Development of this database is still underway. The database will collect the minimum necessary information, contingent upon data sharing and/or business associate agreements, from several existing databases including but not limited to the mental health, substance abuse, Safe Harbors, Veteran's Administration, state hospital, community hospital, and King County Jail information systems. The integrated database will be a resource to any publicly funded housing program that provides services to the target population. Information will be retrievable only after a prospective client has given permission to release it to a specific program or programs.

Mental Health, Chemical Abuse and Dependency Services Division (MHCADSD) will draw upon the expertise and knowledge of acknowledged experts in the field to ensure that the database and ultimately the coordinated entry model satisfy relevant privacy, security and confidentiality requirements. Another goal of outside consultation will be to determine the feasibility of incorporating elements of best practice models from other locales. The result will be a state-of-the-art, dynamic and responsive shared information hub that will facilitate systematic, coordinated outreach and referrals.

PROGRESS DURING 2008

Two levy strategy areas were combined to integrate two related efforts from the Service Improvement Plan: 2.1(a-1) and 5.7. Strategy 2.1 objectives are to identify, engage and house long-term homeless people who make the highest use of public safety and emergency medical systems. It is made up of several sub-activities of which Activity 2.1 (a-1) is one. This sub-activity focuses on development of a database that will identify “high utilizers” of these systems. The database will ultimately facilitate coordinated entry into existing and new housing, services and supports. Combined with this activity is Strategy 5.7 providing additional support and expertise for the MHCADSD and system partners during the development of the high utilizer database and coordinated entry system.

The project lead for the High Utilizer Integrated Database was hired in mid-June 2008, and initially focused on development of a detailed work plan for the project and participation in a number of workgroups and stakeholder meetings to understand the perspectives of the various constituents. Participation and collaboration continue as a number of the county, city and coalition initiatives have similar goals and objectives. These include the Committee to End Homelessness, United Way Client Care Coordination group, Public Health – Seattle & King County, King County Department of Community and Human Services, Primary Medical Care group, Mental Health and Substance Abuse Treatment Services in King County, and Public Health & MHCADSD Partnership for Health Improvement through Shared Information (PHISI) group. The collaboration and partnerships that have developed over the past several months are essential to building an integrated capacity for sharing information.

The information technology development of the database has been delayed for several months due to difficulties in recruiting and hiring for an application developer position. At the end of 2008, the position had not yet been filled. Discussions related to Strategy 5.7 continue with a focus on identifying consultation and training that will have maximum value to the county and its partners.

SERVICES PROVIDED

The database is still in development.

FOR MORE INFORMATION

Program Manager: René Franzen, Mental Health, Chemical Abuse and Dependency Services Division
E-mail: rene.franzen@kingcounty.gov